FEDERAL COMMUNICATIONS COMMISSION Washington, DC 20554

Approved by OMB 3060-0076
Est. time per response: 1 hour

COMMON CARRIER ANNUAL EMPLOYMENT REPORT [Please read instructions before completing and for Notice regarding public burden.]

SECTION 1 - General Information			5	10000		ore combien		Li como i com il socio della socio della controli Si ma con i socio i costato della socio della socio della controli.	babile serve.	2					
1. Name and Mailing Address of Respondent	espondent														
MAP Paging, Inc. 840 Greenbrier Circle Chesapeake, VA 23320	0												Check his a char address.	Check here if this is a change of address.	
2. Year Report Filed		3. Reporting Period Co	Reporting Period (Ending Date of Pay Period Covered by Report)	ng Date of Pa	3		4. Number o	Number of Full-Time Employees during Selected Reporting Period (check one):	nployees dur	ing Selected					
2017		N/A	Melen py wh	Š			a. V Fe	a. Fewer than 16 (complete Sections I, IV, and V only) b. 16 or more (complete all sections)	omplete Sec plete all secti	tions I, IV, and ons)	IV only)				
SECTION II - Full-Time Employees.	S.														
							Num (Report empl	Number of Employees (Report employees in only one category	yees one category						
Job								Race/Ethnicity	,						
Categories	Hispa	Hispanic or						Not-Hispanic or Latino	ic or Latino						Total
		uno			Male	ile					Female	nale			Columns A - N
	Male	Female	White	Black or African	Native Hawaiian or	Asian	American Indian or	Two or more	White	Black or African	Native Hawaiian or	Asian	American Indian or	Two or more	
					Other Pacific Islander		Alaska Native				Other Pacific Islander		Alaska Native		
	A	В	С	O	Е	F	6	н	1	ľ	*	L	M	z	0
Executive/Senior Level Officials and Managers 1.1															0
First/Mid-Level Officials and 1.2															0
Professionals 2															0
Technicians 3															0
Sales Workers 4															0
Administrative Support 5 Workers															0
Craft Workers 6															0
Operatives 7															0
Laborers and Helpers 8															0
Service Workers 9															0
TOTAL 10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
PREVIOUS YEAR TOTAL 11	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

SECTION III - Patri lilie ciripioyees.	- 009.							Nun	Number of Employees	oyees						
<u>.</u>								(Vebot emb	Race/Ethnicity	y						
Categories		Hispanic or							Not-Hispar	Not-Hispanic or Latino						Total
		Latino				Male	le					Female	nale			Columns A - N
	Male	e Female	ale White		Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	
	> I	æ	c		0	т	П	Q	I	-	د	7	_	Z	z	0
Executive/Senior Level Officials and Managers 1.1																0
First/Mid-Level Officials and Managers	1.2															0
Professionals	N															0
Technicians	ω															0
Sales Workers	4															0
Administrative Support Workers	υ															0
Craft Workers	o															0
Operatives	7															0
Laborers and Helpers	ω															0
Service Workers	9															0
TOTAL 1	10 0	0	0		0	0	0	0	0	0	0	0	0	0	0	0
PREVIOUS YEAR TOTAL 1	0	0	0		0	0	0	0	0	0	0	0	0	0	0	0
SECTION IV - Report of Discrimination Complaints Pursuant to 47 CFR 22.321, 23.55, 90.188, 101.4, and 101.311.	nination C	omplaints Pu	irsuant to 4	7 CFR 22.	321, 23.55	, 90,168, 101	.4, and 101	311.	•							
This is to advise the Commission that no complaints regarding violations of the equal employment provisions of Federal, state, territorial, or local statutes have been filed against this company before any body having competent jurisdiction in such matters during the calendar year covered by this report. This is to advise the Commission that the following complaints alleging violations of the provisions of any equal employment opportunity statute have been filed against this company. (Attach a list indicating parties involved, date filed, courts or agencies before which the matter has been heard, file number or other designation, and current status or disposition.	Commissi body hav Commissi ng parties	on that no cor ing competent on that the fol involved, date	mplaints reg t jurisdiction llowing comp ∍ filed, courts	arding viola in such ma olaints alleg s or agenci	ations of the atters during ging violations before v	e equal empl g the calend ons of the pro	loyment provar year cove ar year cove ovisions of a tter has been	risions of Fed red by this re red emplal emp n heard, file n	eral, state, ter port. loyment oppo umber or othe	mtorial, or loc rtunity statute er designation	al statutes ha have been fi n, and current	statutes have been filed against this ave been filed against this company and current status or disposition.	ngainst this secompany.			
SECTION V - Certification Loerdify that to the best of my knowledge, information, and belief, all statements in this report are true and correct.	wledge, in	formation, and	d bellef, all s	tatements	in this repo	ort are true a	nd correct.									
Date 15 O5/22/2017	yped or Printed Nam Grant Sibley	Typed or Printed Name of Person Signing Grant Sibley	Person Sign	ning			Signature		F.R	\cup			Telephone No. (757) 42	elephone No. (757) 424-1191	_	
Title of Person Signing				유실	LLFULLY F	ALSE STAT	EMENTS MA	ADE ON THIS STRUCTION	WILLFULLY FALSE STATEMENTS MADE ON THIS FORM ARE A LANSHABLE OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (47 U.S.C. 312 (A))	PLANSHABL U.S.C. 312 (E BY FINE AI	ND/OR IMPRIS	SONMENT (1	8 U.S.C. 100 503).	BY FINE AND/OR IMPRISONMENT (18 U.S.C. 1001) AND/OR REVOCATION (1) AND/OR FORFEITURE (47 U.S.C. 503).	VOCATION